



# COUNTY OF LOS ANGELES

## DEPARTMENT OF PUBLIC WORKS

"To Enrich Lives Through Effective and Caring Service"

### MEMO OF REVIEW FOR CORRECTNESS AND COMPLETION

In accordance with this community's participation in the National Flood Insurance Program's Community Rating System, all FEMA Elevation Certificates must be correct and complete. The attached Certificate has some incorrect items which are noted here.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 44525 92nd Street East		Company NAIC Number
City Lancaster	State CA	ZIP Code 93535
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) AIN: 3376-011-001		

- A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) \_\_\_\_\_
- A5. Latitude/Longitude: Lat. \_\_\_\_\_ Long. \_\_\_\_\_ Lat 34° 41' 34.3" Long 117° 57' 56.5" Horizontal Datum: ☐ NAD 1927 ☒ NAD 1983
- A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.
- A7. Building Diagram Number \_\_\_\_\_
- A8. For a building with a crawl space or enclosure(s), provide
- |  |  |
|--|--|
| a) Square footage of crawl space or enclosure(s) _____ sq ft   | A9. For a building with an attached garage, provide:   |
| b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade _____ | a) Square footage of attached garage _____ sq ft   |
| c) Total net area of flood openings in A8.b _____ sq in  | b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade _____ |
|  | c) Total net area of flood openings in A9.b _____ sq in  |

### SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number Los Angeles County 065043		B2. County Name		B3. State	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date July 6, 1998	B7. FIRM Panel Effective/Revised Date	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)

- B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in item B9.  
☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other (Describe) \_\_\_\_\_
- B11. Indicate elevation datum used for BFE in item B9: ☒ NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe) \_\_\_\_\_
- B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☐ No  
Designation Date \_\_\_\_\_ ☐ CBRS ☐ OPA

### SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

- C1. Building elevations are based on: ☐ Construction Drawings\* ☐ Building Under Construction\* ☒ Finished Construction  
\*A new Elevation Certificate will be required when construction of the building is complete.
- C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, ARIA, ARIA/E, ARIA1-A30, ARIA/H, ARIA/O. Complete items C2.a-g below according to the building diagram specified in item A7.  
Benchmark Utilized \_\_\_\_\_ Vertical Datum \_\_\_\_\_  
Conversion/Comments \_\_\_\_\_

COMMENTS: EC is Not Applicable. LOMA Case No. 06-09-BA42A and 05-09-1509A issued.

Date of Review: 7/29/10

Community Official: [Signature]

All elevation certificates shall be maintained by the community and copies with the attached memo made available upon request.

FEDERAL EMERGENCY MANAGEMENT AGENCY  
NATIONAL FLOOD INSURANCE PROGRAM

O.M.D. 11-2007  
Expires December

# ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

<b>SECTION A - PROPERTY OWNER INFORMATION</b>			For Insurance Company Use	
BUILDING OWNER'S NAME [REDACTED]			Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 44525 92ND STREET EAST			Company NAIC Number	
CITY LANCASTER	STATE CA	ZIP CODE 93535		
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) TAX PCL NO. 3376-011-001				
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) DETACHED GARAGE				
LATITUDE/LONGITUDE (OPTIONAL) (##-##-##.## or ##.####)		HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983		SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other:

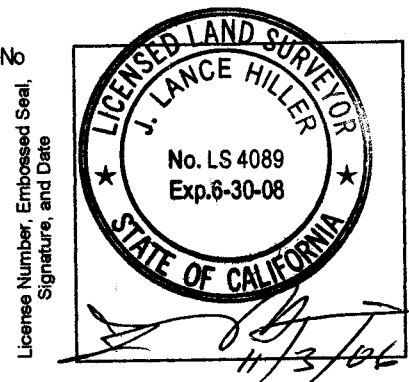
## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER UNINCORPORATED AREA		B2. COUNTY NAME LOS ANGELES		B3. STATE CA	
B4. MAP AND PANEL NUMBER 065043 0125	B5. SUFFIX B	B6. FIRM INDEX DATE 11/15/85	B7. FIRM PANEL EFFECTIVE/REVISED DATE 12/2/80	B8. FLOOD ZONE(S) A	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding)

- B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.  
☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other (Describe):
- B11. Indicate the elevation datum used for the BFE in B9: ☐ NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe):
- B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No Designation Date

## SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

- C1. Building elevations are based on: ☐ Construction Drawings\* ☒ Building Under Construction\* ☐ Finished Construction
- \*A new Elevation Certificate will be required when construction of the building is complete.
- C2. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)
- C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO  
 Complete items C3.-a-i below according to the building diagram specified in item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.  
 Datum NGVD1929 Conversion/Comments
- Elevation reference mark used LOS ANGELES Does the elevation reference mark used appear on the FIRM? ☐ Yes ☒ No
- ☐ a) Top of bottom floor (including basement or enclosure) 2445. 0 ft.(m)
- ☐ b) Top of next higher floor NA. ft.(m)
- ☐ c) Bottom of lowest horizontal structural member (V zones only) NA. ft.(m)
- ☐ d) Attached garage (top of slab) 2445. 0 ft.(m)
- ☐ e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) NA. ft.(m)
- ☐ f) Lowest adjacent (finished) grade (LAG) 2444. . ft.(m)
- ☐ g) Highest adjacent (finished) grade (HAG) 2444. 6 ft.(m)
- ☐ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade NA
- ☐ i) Total area of all permanent openings (flood vents) in C3.h NA sq. in. (sq. cm)



## SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information.  
 I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available.  
 I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

CERTIFIER'S NAME J. LANCE HILLER LICENSE NUMBER LS 4089

TITLESURVEYOR/OWNER		COMPANY NAME SITE SURVEYING	
ADDRESS 42919 CHICORY AVE.	CITY LANCASTER	STATE CA	ZIP CODE 93534
SIGNATURE [Signature]	DATE 11/3/2006	TELEPHONE 661-948-2428	

NOTE: In these spaces, copy the corresponding information from Section A.

STREET ADDRESS (including Apt., Unit, Suite, and  
Box No.) OR P.O. ROUTE AND BOX NO.  
32ND STREET EAST

LANCASTER

STATE  
CA

ZIP CODE  
93535

For Insurance Company Use:

Policy Number

Company NAIC Number

### SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

COMMENTS

C3. LOS ANGELES COUNTY BENCH MARK

ELEV. CERT. IS FOR BUILDING FORMS PRIOR TO CONC. POUR

☐ Check here if attachments

### SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

E1. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed – see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

E2. The top of the bottom floor (including basement or enclosure) of the building is 0 ft.(m) 5 in.(cm) ☒ above or ☐ below (check one) the highest adjacent grade. (Use natural grade, if available).

E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is    ft.(m)    in.(cm) above the highest adjacent grade. Complete Items C3.h and C3.i on front of form.

E4. The top of the platform of machinery and/or equipment servicing the building is    ft.(m)    in.(cm) ☐ above or ☐ below (check one) the highest adjacent grade. (Use natural grade, if available).

E5. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?

☐ Yes ☐ No ☐ Unknown. The local official must certify this information in Section G.

### SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E are correct to the best of my knowledge.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

J. LANCE HILLER

ADDRESS  
42919 CHICORY AVE

CITY  
LANCASTER

STATE  
CA

ZIP CODE  
93534

SIGNATURE

DATE  
11/3/2006

TELEPHONE  
661-948-2428

COMMENTS

☐ Check here if attachments

### SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

G1. ☐ The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)

G2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

G3. ☐ The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER

G5. DATE PERMIT ISSUED

G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED

G7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is:

   ft.(m)

Datum:

G9. BFE or (in Zone AO) depth of flooding at the building site is:

   ft.(m)

Datum:

LOCAL OFFICIAL'S NAME

TITLE

COMMUNITY NAME

TELEPHONE

SIGNATURE

DATE

COMMENTS

☐ Check here if attachments